

THE SURVEY

M I D M O N T H L Y

February 15
1929



Volume LXI
No. 10

Shall We Support the Newton Bill?

By HAZEL CORBIN, R.N.

I AM supporting the Newton bill because I believe that the government of this country should assume responsibility for the health of its citizens including the special needs of the mothers of the country. The Newton bill is an attempt to do this latter.

There are more than two million pregnant women in the United States, distributed over 3,026,789 square miles of territory. Year after year, more than twenty thousand women die from causes due to childbirth—one mother for every one hundred and fifty babies born.

Many of these deaths could be prevented by adequate care. The birth of a baby is such a commonplace, every-day occurrence, that people do not realize that during pregnancy the margin between health and disease becomes dangerously narrow and only by skilled, medical supervision can the maintenance of health be assured.

Every mother in the country needs skilled medical supervision, nursing care, and instruction during pregnancy, at delivery, and for the six weeks that follow. Many families do not know of this need. Not all families can provide this care. It is not available at any price in many parts of this rich country. There are not doctors, nurses and midwives properly trained to give adequate care to all mothers.

Some states require only that a doctor shall see six babies born in order to qualify for a license

which permits him to care for any obstetrical patient, no matter what the complication.

Of the twenty thousand nurses who will receive diplomas from hospital training-schools this year, according to Dr. May Ayres Burgess, ten thousand are not eligible for jobs as salesgirls in an enterprising department store because they have not the educational requirements. Yet they will be absorbed into the nursing profession and a share of them will be doing the country's maternity nursing, for they are meeting the educational requirements of their states.

There are, caring for our mothers, midwives so ignorant and superstitious as to suppose hemorrhage can be controlled by placing an axe upside down under the patient's bed. Of about fifty thousand practicing midwives only a small portion are well-trained and the majority are untrained—yet in most instances they are licensed or registered by their states.

This lack of trained personnel is not the fault of doctors, nurses and midwives but of the people—who do not know that maternity needs skilled care. It is the people who support the medical and nursing schools and who, by their state laws, regulate the practice of these professions. Doctors and nurses are continually begging for more money to improve their schools, for higher standards of education, because they feel their lack of preparation to meet adequately the problems of caring for the health of

THE Sheppard-Towner Act expires on June 30, 1929, and unless Congress provides a further federal subsidy, the work for mothers and children which its funds have furthered during the past six years will cease (see The Survey, January 1, 1929, page 445). The proposed Newton bill would authorize an expenditure of \$1,000,000 annually by the Children's Bureau to continue a child-welfare extension service in the states and the District of Columbia. Here Hazel Corbin, R.N., general director of the Maternity Center Association in New York, tells why she is supporting the Newton bill, while on page 647 Frances Sage Bradley, M.D., until recently a special agent of the Children's Bureau and formerly director of the Bureau of Child Hygiene under the state health departments of Montana and Arkansas, tells how health looks in the back country where Sheppard-Towner has not yet had time to complete its task of education and demonstration.

mothers and children. No matter how much time and effort the doctors and nurses put into this, in the last analysis it is the people who will require improvement when they realize their own need for skilled care. They must be taught.

THE Sheppard-Towner Act was an attempt on the part of the federal government to teach them what constitutes adequate care of mothers and children. Last summer I drove from coast to coast to see some of the work developed in cooperation with the states with Sheppard-Towner money. I visited nurses, state health officers and directors of bureaus of child hygiene, and studied their reports.

To quote from the report of my findings—briefly, because of limited space—on a few of the many kinds of activities developed with Sheppard-Towner funds:

Literature: Preparation and distribution of pamphlets and letters giving practical information to mothers on hygiene, exercise, diet and clothing during pregnancy; on the preparation of babies' supplies; on the care of the baby after he is born; on the care of small children, etc.

I have mentioned the literature first because this is the service that has reached the greatest number of mothers. My experience in teaching and caring for mothers of different degrees of education and of varying backgrounds had made me feel that really valuable work could be done only by personal contact with them in their homes. It may be that mothers living in inaccessible places depend more on the printed word than do those who live in the cities. At any rate, the letters to the bureaus of child hygiene from the mothers who had received the pamphlets and letters indicate that they found them of real, practical help. Quoting from a few of the dozens of such letters that I read:

I have received your letters and am surely grateful to you for your help. I have a nice big baby boy. He certainly is one big delight to my husband and me, because we have always wanted a baby and now we have him. We lost our first baby three days after she was born but I didn't have the experience and help with her that I had with him.

I am glad I had some one to help me learn the things that you people have told me and I surely appreciate it and I am also glad that I can tell you people and give you my thanks for being so kind to my baby and me. Will you please send these letters to my friend Mrs. — who is expecting. . . .

Dear Friend: I must say friend, I feel that way towards you. I am writing this short note to say *thank you* for your nice letters you sent me which were of such a great help to me and I only wish more women would get those splendid letters. Would you please send the series of prenatal letters and other literature to Mrs. —. She expects her baby in September. This series was a great help to me. . . .

I have already had nine children, and am twenty-seven years of age. Six are living, one is dead, and two were stillborn—all this within the last eleven years. I have always suffered great pain, and [been in labor] up to thirteen hours; I was always in such pain that it is with difficulty that I am able to write about it. This illness, I have taken your advice, and my nerves were not all unstrung; I have not been ill for an hour, excepting that a month before the birth of the child I had pains in my feet and breathed with difficulty. I thank you most sincerely for your advice. I wish every mother could have this help.

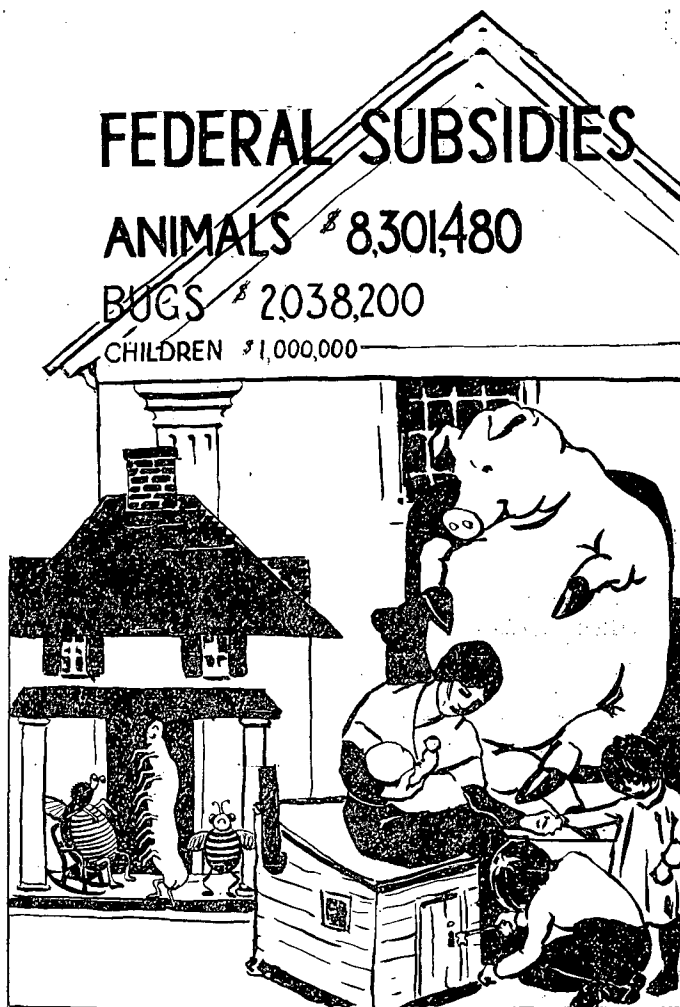
Who is a better judge of service than the person who uses it? What higher recommendations can any one give than to ask the same service for a friend? Picture the pregnant woman, far off in the country, her husband as

helpless as she about preparing for the new baby or relieving her discomforts! Her state government sends her a letter every month, telling her what to do and when. Because she knows this is authentic advice, she finds a peace of mind, as well as a practical help.

Institutes: Institutes for doctors and public-health nurses. These institutes are tremendously valuable. They stimulate and encourage doctors and nurses, particularly those who are located far from medical centers. City workers get encouragement, new ideas and inspiration from constant contact with other workers. The isolation that the lone doctor or nurse in a small town or county suffers is indescribable. They give, give, give, and their opportunities to get—new ideas, consultation with their confreres and its consequent inspiration—are few. Furthermore, preventive medicine and health education are comparatively new developments. **Medical and nursing education** of the past emphasized care of the sick, but taught little or nothing of how to prevent illness and keep well people well. This new knowledge must be brought to the busy rural doctor and nurse if rural people are to be taught to keep well.

Midwives: Supervision and registration of midwives, and classes for the practicing midwives. The licensing of midwives tends to weed out the illiterate and malpracticing ones. The classes improve the work done by the others. Thousands of mothers depend on these midwives. Anything which improves their work is indirectly of inestimable value to mothers.

The Sheppard-Towner Act expires June 30, 1929. If



Drawn by Marcia L. Snyder

no Newton bill—then what? Much of the work will stop; much will be so curtailed as to be almost valueless. Perhaps in three or four years, money will be appropriated and an effort be made to pick up what is left and go on. Such a break is expensive and wasteful. We need action now.

There are objections to the Newton bill on the grounds that a federal subsidy is paternalistic, that it violates states' rights, in not requiring that the work be done in cooperation with the states, that a service of this sort should be administered by some other federal department, and so on and so on.

Many of us feel that we need a federal department of health presided over by a secretary who is a member of the President's cabinet—but we cannot discontinue or postpone health until we get that department. The Children's Bureau has proved its competency in effective and economical administration in this field. Again, what difference does it make whether the work to be done is done by the Children's Bureau *alone*, or by the Children's Bureau *and* the states, or by the Children's Bureau *through* the states? So far,

the bureau has never had the resources to catch up with the demands for help that have come in spontaneously from local groups: it seems far-fetched, to say the least, to believe that it is likely to foist unwanted aid upon them. This bill, by authorizing three different methods of action, seems to provide amply for the varying conditions in various parts of the country.

As to the supposedly weakening effect of federal subsidy—why object to our doing for human beings what we accept, as a matter of course in the policies of, say, the Department of Agriculture, which expends eight times as much in subsidies to promote better livestock as it is here proposed to spend, in this same way, for the well-being of women and children? Let us clear away the befogging shibboleths of "states rights" and "paternalism." The Newton bill may not be the best possible legislation that could be devised in the best possible United States, but it does provide a badly needed million for the welfare of mothers and children, and a source of administration which has been proven reliable and trustworthy.

Miss Sheppard-Towner, R. N.

By FRANCES SAGE BRADLEY, M.D.

I. Just a Glimmer

YES, I'm ready," and the hollow-chested, slow-moving woman hung a pot of cow-peas over the hearth to simmer 'gainst the children came home from school. "But hit seems powerful foolish at my time of life to be hunting a baby doctor," she smiled, embarrassed.

"Nothing of the kind," briskly protested the Sheppard-Towner nurse slipping little Joel's sweater over a shaggy head and helping his mother into her coat. Carefully she examined a bottle on the table.

"Did you save this exactly as I showed you?"

Dropping the specimen in her bag she led the way to a shabby coupe bearing testimony to many a tussle with rugged mountain trails and swollen streams. "You women have a funny way of forgetting from one baby to the next what you go through, and you forget that if you had gone to a good doctor in the beginning instead of calling in old Granny Coggins you'd not be having child-bed fever, risen breasts, dragging milk legs around, or being half sick the rest of your days," sputtered the nurse with a final slam to the door of her car.

"I 'low that's so," admitted the woman easing herself to meet a rutty stretch of road. "But I hain't forgot the finest baby I ever had died before hit was two weeks old. Anybody looking at such a likely child would a said he had sho' come here to stay." There was a moment's silence. "And Frony Bryson'll not forget her little girl with as clear, pretty eyes as you'd ever want to see, and now stone blind. Granny Coggins is kin to me and she's a good old woman but seems like she's powerful onlucky with babies."

"Yes," sniffed Miss Sheppard-Towner, "too unlucky for this business. Take my word for it and go to the best doctor you can afford. Go early and go every month till

your time is up. Then it's his turn to come to you," steady-ing little Joel over the next bump.

"Doctors cain't allus git to us off in these parts," reminded Mrs. Collett, "and we uns don't allus git one baby paid for till another is here. My sister's man made good money off on public work and he was bound to git her a doctor. I reckon the man done his best, but you know good and well no car kin cross this mountain in winter, and his mule was six hours making the trip. They stuck it out with the fust three babies and each time the doctor rode up after everything was over. The bill come in just the same," dryly. "Hit's lucky Sally Jane births her babies easy, but seems like she's had no health since that fust one come."

"All the more reason why you should go to a doctor," insisted her mentor. "I want you to arrange today to stay in town with your cousin for two or three weeks before and at least two weeks after this baby is born. Saludy Ann is big enough to help her father with the younger children and give you this change and rest. You may as well get something out of this moonshine prosperity. It may not last always," laughing. But this was no joke to the apprehensive woman who knew more than this city girl of the ways of "revenues."

I RECKON thar's no chancet of rest for me," dully. But there was a fleeting gleam of hope and happy anticipation in the eye of the careworn woman.

"Just do as I tell you," persisted the indomitable one, "and try my way this once. I'll try to bring you to the doctor each month till June 30, just when I'd like to be with you. But never mind," as the woman's face fell, "there's no cause to worry. You arrange with the cousin